

Fill in this information to identify your case and this filing:

Debtor 1 ANGEL DAVID DELGADO  
First Name Middle Name Last Name  
Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name  
United States Bankruptcy Court for the: New Jersey District of Trenton  
Case number 24-12420

Angel Delgado  
RECEIVED

2024 MAR 31 P 5:06

USDC FOR NJ

5<sup>c</sup>  
USA

☐ Check if this is an  
electronic filing

Official Form 106A/B

Schedule A/B: Property

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. For the questions are presented in Adverb-Verb syntax, which carries multiple meanings and interpretations. For I will complete the answers to the best of my inner-standing. For I do not agree with the following statement.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

MAY 10 2024

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.  
☒ Yes. Where is the property?

1.1. c/o Chestnut Ave. & Oakdale  
Street address, if available, or other description  
Lot 1, 1/4 % , held in Brother's Estate Trust.  
Hainesport, New Jersey state Exempt.  
City State ZIP Code  
Burlington  
County

What is the property? Check all that apply.

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☒ Land  
☐ Investment property  
☐ Timeshare  
☐ Other

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: 3/4% of Land belongs to others in Trust.

If you own or have more than one, list here:

1.2. c/o Corner of Chestnut Ave. & New York Ave.  
Street address, if available, or other description  
Legal: Intersection of Morestown & Mt. Holly Turnpike.  
Hainesport, New Jersey state Zip Exempt.  
City State ZIP Code  
Burlington  
County

What is the property? Check all that apply.

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☒ Land  
☐ Investment property  
☐ Timeshare  
☐ Other

Who has an interest in the property? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: Mortgage Note under :Rafael :Delgado, Trustor/Bene.

U.S. BANKRUPTCY COURT  
TRENTON, NJ  
BY Manuel DEPUTY

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ Approx. \$315,000.00  
Current value of the portion you own? \$ Approx. 78,000.00  
But my Share is sold for Gold Pc. to Trust.  
Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

My deceased brother purchased the Land in 2005.

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ Approx. 268,000.00  
Current value of the portion you own? \$ Entire Land.

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  
Purchased from Brother sometime in 2004-5.

☐ Check if this is community property (see instructions)

Debtor 1 ANGEL DAVID DELGADO Case number (if known) 24-12420  
 First Name Middle Name Last Name

1.3. c/o Sunflower Circle, Lot between 6 & 7  
 Street address, if available, or other description  
per Jones Farm Plan  
Lumberton, New Jersey state Exempt.  
 City State ZIP Code  
Burlington  
 County

**What is the property?** Check all that apply.

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☒ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ Approx. 800,000.00  
 Current value of the portion you own? \$ Entire Land

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known. Purchased from my sister, who had the house built.

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. \$1,146,000.00

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No  
☒ Yes

3.1. Make: Ford  
 Model: F150  
 Year: 2013  
 Approximate mileage: \_\_\_\_\_  
 Other information:  
Truck

**Who has an interest in the property?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ Approx. 9,000.00  
 Current value of the portion you own? \$ 100%

☐ Check if this is community property (see instructions)

If you own or have more than one, describe here:

3.2. Make: Yamaha  
 Model: VST  
 Year: 2009  
 Approximate mileage: \_\_\_\_\_  
 Other information:  
Motorcycle

**Who has an interest in the property?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ Approx. \$2000.00  
 Current value of the portion you own? \$ 100%

☐ Check if this is community property (see instructions)

Debtor 1

ANGEL DAVID DELGADO

First Name Middle Name Last Name

Case number (if known) 24-13420

3.3. Make: Toyota  
Model: Soloma  
Year: 2008  
Approximate mileage: \_\_\_\_\_  
Other information: \_\_\_\_\_  
car.

Who has an interest in the property? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
Approx. 4000.00	100%
\$ _____	\$ _____

3.4. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
Approximate mileage: \_\_\_\_\_  
Other information: \_\_\_\_\_  
\_\_\_\_\_

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
\$ _____	\$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☐ No  
☐ Yes

4.1. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
Other information: \_\_\_\_\_  
\_\_\_\_\_

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
\$ _____	\$ _____

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_  
Other information: \_\_\_\_\_  
\_\_\_\_\_

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
\$ _____	\$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

\$ 15,000.00

Debtor 1  
 ANGEL DAVID DELGADO  
 First Name Middle Name Last Name

Case number (if known) 24-12420

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No  
☒ Yes. Describe..... Bed, air conditioner, DVD player \$ 300.00

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No  
☒ Yes. Describe..... 2 TVs, 1 computer, 1 printer, cell phone. \$ 800.00

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No  
☐ Yes. Describe..... \$ 0.00

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No  
☒ Yes. Describe..... carpentry tools, lawn mowers, blower, sander. \$ 750.00

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No  
☐ Yes. Describe..... \$ 0.00

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No  
☒ Yes. Describe..... Mostly jeans, tee shirts, jackets, sneakers. Some formal wear. \$ 100.00

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No  
☒ Yes. Describe..... 1 gold pc. received from the sale of Chestnut Ave. & Oakdale. \$ 100.00

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

☒ No  
☐ Yes. Describe..... \$

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☐ No  
☒ Yes. Give specific information..... Diabetes meters (3), Humidifiers (2). \$ 5100.00  
 Burial Plot in Lakeview Memorial Park Cinnaminson, New Jersey - 50% of \$10,000.00 approx.

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 2. Write that number here** \$ 7150.00

Debtor 1  
ANGEL DAVID DELGADO  
First Name Middle Name Last Name

Case number (if known) 24-12420

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the  
portion you own?  
Do not deduct secured claims  
or exemptions.**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No☒ Yes ..... Cash: ..... \$ .....**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes ..... Institution name:

17.1. Checking account:	TD Bank	\$	Approx. \$3000.00
17.2. Checking account:		\$	
17.3. Savings account:		\$	
17.4. Savings account:		\$	
17.5. Certificates of deposit:		\$	
17.6. Other financial account:		\$	
17.7. Other financial account:		\$	
17.8. Other financial account:		\$	
17.9. Other financial account:		\$	

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☐ No☒ Yes ..... Institution or issuer name:

Bond with U.S. Treasury - Birth Certificate Bond - estimated value under one SS No., \$ At least \$35 mil. but not released info.

Certified Bond with CUSSIP No. from Fidelity Bank provided in Binder with other Financial Docs \$

Note Securities for Truck (\$13,000.00) and Property Sunflower Circle, Lumberton (\$560,000.00) \$ 573,000.00

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☒ No

Name of entity:

% of ownership:

☐ Yes. Give specific information about them ..... 0% % \$ 0.00

0% % \$

0% % \$

Debtor 1 **ANGEL DAVID DELGADO**  
First Name Middle Name Last NameCase number (if known) **24-12420****20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☐ No☒ Yes. Give specific information about them.....

Issuer name:

See No. 18.

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**21. Retirement or pension accounts***Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☒ No☐ Yes. List each

account separately.

Type of account:

Institution name:

0.00

401(k) or similar plan: \_\_\_\_\_

\$ \_\_\_\_\_

Pension plan: \_\_\_\_\_

\$ \_\_\_\_\_

IRA: \_\_\_\_\_

\$ \_\_\_\_\_

Retirement account: \_\_\_\_\_

\$ \_\_\_\_\_

Keogh: \_\_\_\_\_

\$ \_\_\_\_\_

Additional account: \_\_\_\_\_

\$ \_\_\_\_\_

Additional account: \_\_\_\_\_

\$ \_\_\_\_\_

**22. Security deposits and prepayments**Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☒ No☐ Yes .....

Institution name or individual:

Electric: \_\_\_\_\_

\$ 0.00

Gas: \_\_\_\_\_

\$ \_\_\_\_\_

Heating oil: \_\_\_\_\_

\$ \_\_\_\_\_

Security deposit on rental unit: \_\_\_\_\_

\$ \_\_\_\_\_

Prepaid rent: \_\_\_\_\_

\$ \_\_\_\_\_

Telephone: \_\_\_\_\_

\$ \_\_\_\_\_

Water: \_\_\_\_\_

\$ \_\_\_\_\_

Rented furniture: \_\_\_\_\_

\$ \_\_\_\_\_

Other: \_\_\_\_\_

\$ \_\_\_\_\_

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**☒ No☐ Yes .....

Issuer name and description:

0.00

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Debtor 1 **ANGEL DAVID DELGADO** Case number (if known) **24-12420**  
First Name Middle Name Last Name

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes ..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\_\_\_\_\_ \$ 0.00  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☐ No

☒ Yes. Give specific information about them...

ESTATE OF RAFAEL DELGADO

\$ \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them...

\_\_\_\_\_

\$ 0.00

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them....

\_\_\_\_\_

\$ 0.00

**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

\_\_\_\_\_

Federal: \$ 0.00  
 State: \$ \_\_\_\_\_  
 Local: \$ \_\_\_\_\_

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

\_\_\_\_\_

Alimony: \$ 0.00  
 Maintenance: \$ \_\_\_\_\_  
 Support: \$ \_\_\_\_\_  
 Divorce settlement: \$ \_\_\_\_\_  
 Property settlement: \$ \_\_\_\_\_

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information.....

\$ 0.00

Debtor 1

ANGEL DAVID DELGADO

First Name Middle Name Last Name

Case number (if known)

24-12420

**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☒ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

With employer - Dart, Inc.

sister

\$ 0.00

Term Life.

\$

\$

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.....

0.00

\$

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim. ....

0.00

\$

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim. ....

0.00

\$

**35. Any financial assets you did not already list**☐ No☒ Yes. Give specific information.....

CHRISTOPHER HAUSER 1099A GRANT OF 1,500,000.00 ; CH is a Banker/Broker working with the U.S. Treasury. Funds were due last August 2023; we are still waiting.

1,500,000.00

\$

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here**

Min. approx. 2,076,000.00



\$

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**☒ No☐ Yes. Describe.....

0.00

\$

**39. Office equipment, furnishings, and supplies***Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices☒ No☐ Yes. Describe.....

0.00

\$



Debtor 1

ANGEL DAVID DELGADO

First Name

Middle Name

Last Name

Case number (if known)

24-12420

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☒ No☐ Yes. Describe.....

\$

**41. Inventory**☒ No☐ Yes. Describe.....

\$

**42. Interests in partnerships or joint ventures**☒ No☐ Yes. Describe..... Name of entity:

% of ownership:

%

\$

%

\$

%

\$

**43. Customer lists, mailing lists, or other compilations**☒ No☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe.....

\$

**44. Any business-related property you did not already list**☒ No☐ Yes. Give specific information .....

\$

\$

\$

\$

\$

\$

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here** →

\$ 0.00

**Part 6:****Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**☒ No. Go to Part 7.☐ Yes. Go to line 47.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**47. Farm animals***Examples:* Livestock, poultry, farm-raised fish☐ No☐ Yes.....

\$

Debtor 1 **ANGEL DAVID DELGADO** Case number (if known) **24-12420**  
 First Name Middle Name Last Name

**48. Crops—either growing or harvested**

☒ No  
☐ Yes. Give specific information..... \$

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

☒ No  
☐ Yes..... \$

**50. Farm and fishing supplies, chemicals, and feed**

☒ No  
☐ Yes..... \$

**51. Any farm- and commercial fishing-related property you did not already list**

☒ No  
☐ Yes. Give specific information..... \$

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** → \$ **0.00**

**Part 7: Describe All Property You Own or Have an Interest In That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

☒ No  
☐ Yes. Give specific information..... \$ **0.00**  
 \$  
 \$

**54. Add the dollar value of all of your entries from Part 7. Write that number here** → \$ **0.00**

**Part 8: List the Totals of Each Part of this Form**

**55. Part 1: Total real estate, line 2** → \$ **1,146,000.00**

**56. Part 2: Total vehicles, line 5** \$ **15,000.00**

**57. Part 3: Total personal and household items, line 15** \$ **7,150.00**

**58. Part 4: Total financial assets, line 36** \$ **2,076,000.00**

**59. Part 5: Total business-related property, line 45** \$ **0.00**

**60. Part 6: Total farm- and fishing-related property, line 52** \$ **0.00**

**61. Part 7: Total other property not listed, line 54** + \$ **0.00**

**62. Total personal property. Add lines 56 through 61.** \$ **2,098,150.00** Copy personal property total → + \$ **2,098,150.00**

**63. Total of all property on Schedule A/B. Add line 55 + line 62.** \$ **3,244,150.00**

Fill in this information to identify your case:

Debtor 1 ANGEL DAVID DELGADO  
First Name Middle Name Last Name  
Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name  
United States Bankruptcy Court for the: New Jersey District of Trenton  
Case number 24-12420  
(if known)

2024 MAR 31 P 5:06

By: Angel Delgado  
AUTHORIZED REPRESENTATIVE ALL RIGHTS RESERVED  
WITHOUT PREJUDICE.

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). For I will answer the questions to the best of my innerstanding, as the language used in these forms are written in Adverb-Verb Syntax grammar, which has multiple meanings. For I do not agree with the grammar used for no meeting of the minds.

#### 1. Do any creditors have claims secured by your property?

- ☒ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
☒ Yes. Fill in all of the information below. For the Security Instruments, Note Securities, were cashed and cured the Deed of Trusts at Closing.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion if any
Do not deduct the value of collateral.		

##### 2.1 Jay Brey, CEO

Describe the property that secures the claim:

\$ 0.00 \$ \$

Creditor's Name  
Nationstar/Mr. Cooper Mtg. Co.  
Number Street  
c/o 8950 Cypress Blvd.  
Coppell, Texas (76019)  
City State ZIP Code

Land: Chestnut Avenue & Oakdale, Hainesport, New Jersey state.

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ Settled, For there exists no issue of material fact. Nationstar cashed the Note Securities, which cured the Deed of Trusts on or by closing.

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset) No pending lien exists.

Who owes the debt? Check one.

- ☒ Debtor 1 only Deceased Brother.  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

##### 2.2 Terry Smith, CEO

Describe the property that secures the claim:

\$ 0.00 \$ \$

Creditor's Name  
Rushmore Loan Svcing. Co.  
Number Street  
c/o 8950 Cypress Blvd.  
Coppell, Texas (76019)  
City State ZIP Code

Land: Chestnut Avenue & Oakdale, Hainesport, New Jersey state.

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ Settled, For there exists no issue of material fact. Nationstar cashed the Note Securities, which cured the Deed of Trusts on or by closing.

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

DUPLICATE CLAIM OF 2.1.

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 0.00

Debtor 1 **ANGEL DAVID DELGADO** Case number (if known) **24-12420**  
 First Name Middle Name Last Name

Part 1:

**Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion if any
Approx. 5,000.00	Approx. 9000.00	4000.00

**23** Westlake Financial  
 Creditor's Name  
 Attn: LBX#71911  
 Number Street  
 3440 Flair Drive  
 El Monte, California (91731)  
 City State ZIP Code

Describe the property that secures the claim:

Truck: Ford F150

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Seek to continue.

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number **2 8 12**

**24** Bruce Rose, CEO  
 Creditor's Name  
 Carrington Mortgage Co.  
 Number Street  
 ISAOA/ATIMA, P.O. Box 692 408  
 San Antonio, Texas (78269-2419)  
 City State ZIP Code

Describe the property that secures the claim:

\$ 0.00 \$ \$

Land: (2611) Chestnut Ave. & New York Ave, Hainesport, New Jersey state.

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent ☒ Settled, For there exists no issue of material fact.  
☐ Unliquidated Carrington or Agent cashed the Note Securities, which cured the Deed of Trusts on or by closing in 2004-5.  
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☒ Other (including a right to offset) **No pending lien exists.**

Who owes the debt? Check one.

- ☒ Debtor 1 only **Brother's Mtg.**  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number **6 6 4 3;**

**25** A Great Mortgage Co.  
 Creditor's Name  
 Number Street  
 c/o 921 Pleasant Valley Avenue,  
 Mount Laurel, New Jersey (08054)  
 City State ZIP Code

Describe the property that secures the claim:

\$ 0.00 \$ \$

Land: (22) Sunflower Circle, Lot 7, Lumberton, New Jersey state

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent ☒ Settled, For there exists no issue of material fact.  
☐ Unliquidated A Great Mortgage Co. or Agent cashed the Note Securities, which cured the Deed of Trusts on or by closing in 2004. Company did not discharge from credit until 2021?  
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number **2194**

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

If this is the last page of your form, add the dollar value totals from all pages.

\$0.00

Write that number here:

Debtor 1

ANGEL DAVID DELGADO

First Name Middle Name Last Name

Case number (if known)

24-12420

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐ N/A

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

☐

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

☐

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

☐

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

☐

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

☐

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1 ANGEL DAVID DELGADO  
 First Name Middle Name Last Name  
 Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name  
 United States Bankruptcy Court for the: New Jersey District of Trenton  
 Case number 24-12420  
 (If known)

☐ Check if this is an amended filing

Official Form 106E/F

By: Angel D. Delgado  
 Authorized representative. ALL RIGHTS RESERVED. PREJUDICE.

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). For I will answer the questions to the best of my understanding. For these questions are written in Adverb-Verb syntax grammar which provides multiple meanings. For I do not agree with the use of this grammar.

**Part 1: List All of Your PRIORITY Unsecured Claims**

**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.  
☒ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

2.1 U.S. Department of Education  
 Priority Creditor's Name  
GS/ATL P.O. Box 530212  
 Number Street  
 City State ZIP Code  
**Who incurred the debt?** Check one.  
☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
**Is the claim subject to offset?**  
☐ No  
☒ Yes

Total claim Approx. 30,000.00  
 Priority amount approx. 30,000.00  
 Nonpriority amount 0.00  
 Last 4 digits of account number 6328  
 When was the debt incurred? 8/31/2010  
**As of the date you file, the claim is:** Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☒ Disputed  
**Type of PRIORITY unsecured claim:**  
☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☒ Other. Specify Gov. Student Loan.

2.2 New Jersey Environmental Co.  
 Priority Creditor's Name  
P.O. Box 420  
 Number Street  
Trenton, New Jersey (08646)  
 City State ZIP Code  
**Who incurred the debt?** Check one.  
☐ Debtor 1 only An unknown Mr. Hicks, but not me  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt  
**Is the claim subject to offset?**  
☐ No  
☐ Yes

Last 4 digits of account number 2996 Approx. 10,000.00 Approx. 10,000.00 0.00  
 When was the debt incurred? Unknown for this is not my debt. for I am not Mr. Hicks.  
**As of the date you file, the claim is:** Check all that apply.  
☐ Contingent  
☐ Unliquidated  
☒ Disputed  
**Type of PRIORITY unsecured claim:**  
☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☒ Other. Specify for Unknown/Fake charges/fabricate but claims it is "Tax"

Debtor 1

ANGEL DAVID DELGADO

First Name Middle Name Last Name

Case number (if known)

**Part 1: Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim Priority amount Nonpriority amount

2.3

state of New Jersey Taxation

Last 4 digits of account number 2996

Approx. 10,000.00 Approx. 0.00  
\$ 10,000.00 \$Priority Creditor's Name  
(Duplicate Environmental Bill)

When was the debt incurred? UNKNOWN

Number Street

P.O. box 002

As of the date you file, the claim is: Check all that apply.

Trenton, New Jersey (08625)

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

DUPLICATE BILLING

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only I AM NOT HARKER. NOT ME  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☒ Other. Specify Duplicate Environmental bill/ Fake charges, unknown why.

Is the claim subject to offset?

- ☐ No  
☐ Yes

Priority Creditor's Name

Last 4 digits of account number \$ \$ \$

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify

Is the claim subject to offset?

- ☐ No  
☐ Yes

Priority Creditor's Name

Last 4 digits of account number \$ \$ \$

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify

Is the claim subject to offset?

- ☐ No  
☐ Yes

ANGEL DAVID DELGADO

Document

Page 16 of 29

24-12420

Debtor 1

First Name

Middle Name

Last Name

Case number (if known)

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. For I will answer the questions to the best of my understanding. For the language used is Adverb-Verb syntax grammar, which provides multiple meanings. For I do not agree with the use of this grammar.

**4.1** Jefferson Health - Medical bill

Nonpriority Creditor's Name

P.O. Box 785992

Number Street

Philadelphia, Pennsylvania (19178)

City State ZIP Code

Last 4 digits of account number 0780

When was the debt incurred? 4/19/24

Total claim

\$ 163.44**Who incurred the debt?** Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt**Is the claim subject to offset?**

- ☐ No
- ☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Medical bill

**4.2** UMR - Dr. Todd Schachter, D.O.

Nonpriority Creditor's Name

c/o UMR P.O. box 30541 / Virtua Medical Group

Number Street

Salt Lake City, Utah (84130)

City State ZIP Code

Last 4 digits of account number 8110

When was the debt incurred? 4/6/24

\$ 234.49**Who incurred the debt?** Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt**Is the claim subject to offset?**

- ☐ No
- ☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Medical bill

**4.3** UMR - Hospital Stay

Nonpriority Creditor's Name

P.O. box 30541

Number Street

Salt Lake City Utah (84130)

City State ZIP Code

Last 4 digits of account number 2984.96

When was the debt incurred? 4/24

\$ 2984.96**Who incurred the debt?** Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt**Is the claim subject to offset?**

- ☐ No
- ☐ Yes

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

**Type of NONPRIORITY unsecured claim:**

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Medical bill



Debtor 1

First Name Middle Name Last Name

Case number (if known)

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

UMR - KENNEDY UNIV. HOSPITAL

Nonpriority Creditor's Name  
 P.O. BOX 30541

Number Street  
 SALT LAKE CITY, UTAH (84130)

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

Last 4 digits of account number 8000  
 4/7/24

\$ 4421.23

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify MEDICAL BILL

4.5

Barry Sharer, Esquire/Joshua Raymond

Nonpriority Creditor's Name  
 75 Livingston Avenue

Number Street  
 Roseland, New Jersey (07068)

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☒ Yes

Last 4 digits of account number Unknown  
 2008?

\$ 1,400,000.00  
 Approx.

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent For this should have been discharged in 2018.  
☐ Unliquidated  
☒ Disputed Third party debt?????No contract.

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify Ex Brother in law BK mess.

Last 4 digits of account number

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☐ Other. Specify

Debtor 1

First Name Middle Name Last Name

Case number (if known)

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

N/A

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Claims

Last 4 digits of account number \_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

- Line \_\_\_\_ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Claims

Last 4 digits of account number \_\_\_\_

Debtor 1

First Name Middle Name Last Name

Case number (if known)

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.  
Add the amounts for each type of unsecured claim.

		Total claim
<b>Total claims from Part 1</b>	6a. Domestic support obligations	6a. \$ 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$ 10,000.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ 0.00
	6e. Total. Add lines 6a through 6d.	6e. \$ 10,000.00

		Total claim
<b>Total claims from Part 2</b>	6f. Student loans	6f. \$ 30,000.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ 1,407,804.12
	6j. Total. Add lines 6f through 6i.	6j. \$ 1,437,804.12

Fill in this information to identify your case:

Debtor **ANGEL DAVID DELGADO**  
First Name Middle Name Last Name

Debtor 2  
(Spouse if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the New Jersey District of Trenton

Case number 24-12420  
(If known)

Angel Delgado  
RECEIVED  
5<sup>c</sup>  
USA

2024 MAR 31 P 5:01

By Angel D. Delgado  
USDC FO  
AUTHORIZED REPRESENTATIVE. ALL RIGHTS RESERVED. WITHOUT  
PREJUDICE.

☐ Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). For I will answer the questions to the best of my innerstanding. For this is written In Adverb-Verb syntax which provides multiple meanings. For I do not agree with the use of this grammar.

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1 n/a  
Name

Number Street

City State ZIP Code

2.2  
Name

Number Street

City State ZIP Code

2.3  
Name

Number Street

City State ZIP Code

2.4  
Name

Number Street

City State ZIP Code

2.5  
Name

Number Street

City State ZIP Code

Debtor 1 **ANGEL DAVID DELGADO**  
First Name Middle Name Last Name

Case number (if known) **24-12420**

**Additional Page if You Have More Contracts or Leases**

**Person or company with whom you have the contract or lease**

**What the contract or lease is for**

**2.2**

Name

Number Street

City State ZIP Code

**2.**

Name

Number Street

City State ZIP Code

**2.**

Name

Number Street

City State ZIP Code

**2.**

Name

Number Street

City State ZIP Code

**2.**

Name

Number Street

City State ZIP Code

**2.**

Name

Number Street

City State ZIP Code

**2.**

Name

Number Street

City State ZIP Code

**2.**

Name

Number Street

City State ZIP Code

Fill in this information to identify your case:

Debtor 1 **ANGEL DAVID DELGADO**  
First Name Middle Name Last Name  
Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name  
United States Bankruptcy Court for the: **New Jersey** District of **Trenton**  
Case number **24-12420**  
(if known)

RECEIVED

2024 MAR 31 P 5:06

By: *Angel Delgado*  
AUTHORIZED REPRESENTATIVE  
ALL RIGHTS RESERVED WITHOUT PREJUDICE.

☐ Check if this is an amended filing

Official Form 106H

**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. For I will answer these questions to the best of my innerstanding. For Adverb-Verb syntax grammar is used which provides multiple meanings. For I do not agree with the use of this grammar. For it is misleading and there is no meeting of the minds.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No

☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 **Barry Sherer, Esq. / Joshua H. Raymond**

Name **75 Livingston Avenue**

Number Street **Roseland, New Jersey (07068)**

City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☒ Schedule E/F, line **4.5**

☐ Schedule G, line \_\_\_\_\_

3.2

Name

Number Street

City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

3.3

Name

Number Street

City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_\_

Debtor 1 ANGEL DAVID DELGADO Case number (if known) 24-12420

First Name Middle Name Last Name

**Additional Page to List More Codebtors**

Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
<p>3. Christopher R. Shafer, Jr.</p> <p>Name _____</p> <p>Unknown</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p>	<p>Check all schedules that apply:</p> <p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line <u>4,5</u></p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3. Matthew Shafer</p> <p>Name _____</p> <p>Unkown</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line <u>4,5</u></p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3. :Dorkas-Iris Delgado-Shafer</p> <p>Name _____</p> <p>c/o P.O. box 664</p> <p>Number _____ Street _____</p> <p>Hainesport, New Jersey (08036) Non-domestic</p> <p>City _____ State _____ ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line <u>4,5</u></p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3. _____</p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3. _____</p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3. _____</p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3. _____</p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3. _____</p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>



Fill in this information to identify your case:

Debtor 1 ANGEL DAVID DELGADO  
First Name Middle Name Last Name  
Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name  
United States Bankruptcy Court for the: New Jersey District of Trenton  
Case number 24-12420  
(If known)

Check if this is:

- ☐ An amended filing  
☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

By: Angel D. Delgado  
Authorized Representative. ALL RIGHTS RESERVED  
WITHOUT PREJUDICE.

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. For I will answer these questions to the best of my innerstanding. For it is written in Abverb-Verb syntax grammar, which provides multiple meanings. For I do not agree with the use of this grammar because it prevents a meeting of the minds. For I do not accept and reject and rescind any presumptions, assumptions, codes and statutes, which creates coorsion and misrepresentations.

#### Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.  
☐ Yes. Does Debtor 2 live in a separate household?  
☐ No  
☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☒ No  
☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

USDC FOR NJ

2024 MAR 21 P 5:07

RECEIVED

No  
Yes  
No  
Yes  
No  
Yes  
No  
Yes  
No  
Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☐ No  
☒ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes  
4b. Property, homeowner's, or renter's insurance  
4c. Home maintenance, repair, and upkeep expenses Sister pays.  
4d. Homeowner's association or condominium dues

Your expenses

4. \$ 0.00  
4a. \$ 278.00  
4b. \$ 171.00  
4c. \$ 0.00  
4d. \$ 0.00



Debtor 1 ANGEL DAVID DELGADO  
First Name Middle Name Last Name

Case number (if known) 24-12420

	<b>Your expenses</b>
5. <b>Additional mortgage payments for your residence, such as home equity loans</b>	5. \$ <u>0.00</u>
6. <b>Utilities:</b>	
6a. Electricity, heat, natural gas <span style="float: right;">Sister pays.</span>	6a. \$ <u>0.00</u>
6b. Water, sewer, garbage collection <span style="float: right;">Sister pays.</span>	6b. \$ <u>0.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services <span style="float: right;">Sister pays cable.</span>	6c. \$ <u>130.00</u>
6d. Other. Specify: _____	6d. \$ _____
7. <b>Food and housekeeping supplies</b>	7. \$ <u>600.00</u>
8. <b>Childcare and children's education costs</b>	8. \$ <u>0.00</u>
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ <u>50.00</u>
10. <b>Personal care products and services</b>	10. \$ <u>25.00</u>
11. <b>Medical and dental expenses</b>	11. \$ <u>200.00</u>
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>120.00</u>
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <u>0.00</u>
14. <b>Charitable contributions and religious donations</b> <span style="float: right;">Sister pays.</span>	14. \$ <u>0.00</u>
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>120.00</u>
15b. Health insurance	15b. \$ <u>257.00</u>
15c. Vehicle insurance	15c. \$ <u>500.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. <b>Installment or lease payments:</b>	
17a. Car payments for Vehicle 1	17a. \$ <u>307.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ <u>0.00</u>
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. \$ <u>0.00</u>
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

Debtor 1 ANGEL DAVID DELGADO  
First Name Middle Name Last Name

Case number (if known) 24-12420

21. Other. Specify: \_\_\_\_\_

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

21. +\$ \_\_\_\_\_

22a. \$ 2758.00

22b. \$ 0.00

22c. \$ 2758.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I. Incl. per diem payments.

23b. Copy your monthly expenses from line 22c above.

23c. Subtract your monthly expenses from your monthly income.  
The result is your monthly net income.

23a. \$ 3,836.84

23b. - \$ 2758.00

23c. \$ 1074.84

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

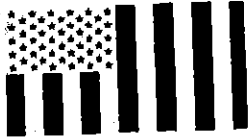
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

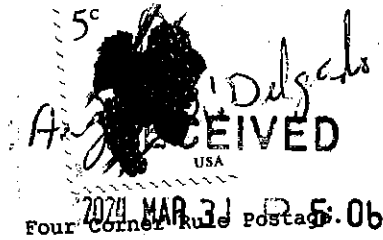
No, other than medical.



Quantum Parse Syntax FLAG



United States Peace Flag



THIS IS A PRIVATE COMMUNICATION BETWEEN THE PARTIES  
NOTICE TO PRINCIPAL IS NOTICE TO AGENT AND  
NOTICE TO AGENT IS NOTICE TO PRINCIPAL.

USDC FOR NJ

From:  
:Angel-David :Delgado.  
Authorized Representative, Sui Juris.  
C/O P.O. BOX 664  
Hainesport, New Jersey state ZIP EXEMPT  
NON-DOMESTIC/NON-US.

5/10/2024

To:

Via: HAND DELIVERY

Court Clerk to  
Christine M. Gravelle, Judge.  
Trenton District, Bankruptcy Court  
402 East State Street  
Trenton, New Jersey (08608)  
(Non-Domestic/Non-US)  
609-858-9333.

Re: IN RE: ANGEL DAVID DELGADO, Bk. Case No. 24-12420;  
SCHEDULES.

Dear Court Clerk,

For enclosed please find the following:

1. Letter Re:Schedules due.
2. Schedules:
  - a. 106 A/B
  - b. 106D
  - c. 106 E/F
  - d. 106G
  - e. 106H
  - f. 106J

For the remaining schedules will be submitted Monday, am,  
as we did not have all of the documents to complete the  
additional schedules.

Angel Delgado  
RECEIVED  
2024 MAR 31 P 5:06  
USDC FOR NJ

For further, a binder with Financial documents, such as Deeds, tax return, paystubs and bank statements will be hand delivered to the Trustee today.

For thank you for your time and consideration.

: BY: : Angel D. Delgado TP.  
AUTHORIZED REPRESENTATIVE.  
ALL RIGHTS RESERVED WITHOUT PREJUDICE.

Date: 5/10/2024.

Cc: A. Russo, copies of schedules and binder with financials.

**HAND DELIVERY RECEIPT**

**NOTICE TO PRINCIPLE IS A NOTICE TO AGENT AND NOTICE TO AGENT IS AS NOTICE TO PRINCIPLE.**

To:

Via: **HAND DELIVERY**

Court Clerk to

Christine M. Gravelle, Judge.

Trenton District, Bankruptcy Court

402 East State Street

Trenton, New Jersey (08608)

(Non-Domestic/Non-US)

609-858-9333.

From:

:Dorkas-Iris :Delgado-Shafer,

C/O P.O. BOX 664

Hainesport, New Jersey state ZIP EXEMPT

NON-DOMESTIC/NON-US.

Re: IN RE: ANGEL DAVID DELGADO, Bk. Case No. 24-12240.

1. LETTER  
Schedules.

RECEIVED & SIGNED BY:

Austria Castilla Benito

Date: 5/10/24

TIME:

ALL RIGHTS RESERVED WITHOUT PREJUDICE.